## **FORM D**

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## **FORM D**

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1336	560				
OMB APPR	OVAL				
OMB Number:	3235-0076				
Expires:					
Estimated average	Estimated average burden				
hours per response 16.00					

SEC USE ONLY						
Prefix (	Serial					
DATE RECEIVED						
	1					

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Offering of Class A Units	
Filing Under (Check box(es) that apply): Rule 504  Rule 505  Rule 506  Section 4(6)  Type of Filing:  New Filing  Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
. Enter the information requested about the issuer	1.44000 BB#14.4400 BB[4] [4]00 BB#4 4.000 FB#4 4.000 BB#
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Hallowell International, LLC	07087010
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
	(207) 990-5600
Address of Principal Business Operations (Number and Street, City, State, Zip Code) if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	######################################
manufacturer and seller of heat pumps	PROCESSEL
Type of Business Organization	lease specify): DEC 2 8 2007
corporation limited partnership, already formed other (p	lease specify):
business trust   limited partnership, to be formed   limited liabilit	y company THOMSON
Month Year  Actual or Estimated Date of Incorporation or Organization: 06 05 Actual Estimurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	<del>.</del>
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D o 17d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address	
and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	clow or, if received at that address after the date or
and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be	elow or, if received at that address after the date or
and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.  Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205  Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually	elow or, if received at that address after the date or 549.  y signed. Any copies not manually signed must be stated the name of the issuer and offering, any changes ied in Parts A and B. Part E and the Appendix need
and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.  Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205  Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually shotocopies of the manually signed copy or bear typed or printed signatures.  Information Required: A new filing must contain all information requested. Amendments need only report hereto, the information requested in Part C, and any material changes from the information previously supplements.	elow or, if received at that address after the date or 549.  y signed. Any copies not manually signed must be at the name of the issuer and offering, any changes ied in Parts A and B. Part E and the Appendix need
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filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Managing Partner Full Name (Last name first, if individual) Paslawski, Edward T. Business or Residence Address (Number and Street, City, State, Zip Code) 110 Hildreth Street, Bangor, ME 04401 General and/or Promoter Beneficial Owner Executive Officer Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Hallowell, Duane A. Business or Residence Address (Number and Street, City, State, Zip Code) 110 Hildreth Street, Bangor, ME 04401 Beneficial Owner Executive Officer Promoter General and/or Check Box(es) that Apply: Director Managing Partner Full Name (Last name first, if individual) Flynn, Jody E. Business or Residence Address (Number and Street, City, State, Zip Code) 110 Hildreth Street, Bangor, ME 04401 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Popolizio, Ronald G. Business or Residence Address (Number and Street, City, State, Zip Code) 110 Hildreth Street, Bangor, ME 04401 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					В. П	NFORMATI	ION ABOU	T OFFERI	NG				
1.	Has the	issuer solo	l, or does th	ne issuer in	itend to se	II, to non-a	ccredited i	nvestors in	this offeri	ng?		Yes	No <b>IX</b>
	Answer also in Appendix, Column 2, if filing under ULOE.							_	_				
2.	2. What is the minimum investment that will be accepted from any individual?						\$ <del>12,</del>	500.00					
							Yes	No					
3.								K					
4.	commission of states	sion or sim on to be lis , list the na	ilar remune ted is an ass	ration for s sociated pe roker or de	olicitation rson or age aler. If mo	of purchase int of a brok ore than five	ers in conne er or deale (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	urities in t EC and/or			
Ful	l Name (I	ast name	first, if indi	ividual)							•		
Bus	siness or	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	ip Code)		<u>.</u>				
Nar	ne of Ass	ociated Br	oker or De	aler		·							
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)		***************************************	,,,,,,,,	•••••	•••••••			States
	AL	ÄK	AZ	AR	CA	CO	CT	DE	DC	FL	GĀ	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC NC	ND	OH	OK.	OR IVV	PA DD
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	(WI)	WY	PR
Ful	l Name (I	Last name	first, if ind	ividual)				•		•			
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, a	Zip Code)						
Nar	ne of Ass	ociated Br	oker or De	aler									
Sta	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
	(Check	"All States	" or check	individual	States)		*****************	***************************************	·····			☐ All	States
	AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GĀ	Ш	ID
	IL	IN	IA	(KS)	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK.	OR I	PA
	RI	SC	SD	TN	<u>TX</u>	UŢ	VT	VA	WA)	WV	WI	WY	PR
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	: Address (1	Number an	d Street, C	ity, State,	Zip Code)					<del></del>	
Nai	me of Ass	sociated B	oker or De	aler									
Cen		ich Doran	Listed Ho	- Calinitad	o = 1 = + o = do	to Colinie	Durahagana						• •
Sta			Listed Hass or check									□ Al	l States
	<u> </u>												
	AL IL	AK) IN	AZ IA	[AR]	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK]	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{\mathrm{WV}}$	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

۱.	Enter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check the sold.	k	
	this box and indicate in the columns below the amounts of the securities offered for exchange an already exchanged.	d	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	c 0.00	§ 0.00
	Equity	€ 0.00	\$ 0.00
	Common Preferred	u	
		€ 0.00	0.00 \$
	Convertible Securities (including warrants)		\$ 0.00
	Other (Specify membership interests )		
	Other (Specify Membership interests)	1.500.000.00	·
	Total	\$	3
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in the offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicathe number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."	te	Aggregate
		Number	Dollar Amount
		Investors	of Purchases \$ 1,375,000.00
	Accredited Investors		\$ 0.00
	Non-accredited Investors		
	Total (for filings under Rule 504 only)	··	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	ie	
	Time of Officia	Type of Security	Dollar Amount Sold
	Type of Offering  Rule 505	^	\$ 0.00
			\$ 0.00
	Regulation A		\$ 0.00
			\$ 0.00
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insure. The information may be given as subject to future contingencies. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	r.	
	Transfer Agent's Fees		
	Printing and Engraving Costs		§_0.00
	Legal Fees	<b>Z</b>	\$_2,000.00
	Accounting Fees		\$_1,000.00
	Engineering Fees		\$_0.00
	Sales Commissions (specify finders' fees separately)		<u>\$</u> 0.00
	Other Expenses (identify)		\$ 0.00
	Total		\$ 3,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF I	PROCEEDS		
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	;	\$ 1,497,000.00	
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.			
		Payments to Officers, Directors, & Affiliates	Payments to Others	
	Salaries and fees	□ \$ <u>Ø.∞</u>	□s <u>0.00</u>	
	Purchase of real estate	□\$ <u>0.00</u>	_ S <u>0.00</u>	
	Purchase, rental or leasing and installation of machinery and equipment	□s <u>0.00</u>	<u> □\$ 0.00</u>	
	Construction or leasing of plant buildings and facilities	□\$ <u>0.00</u>	□\$ <u>0.00</u>	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□\$ <u></u> 0.00	\$ <u></u> 0.00	
	Repayment of indebtedness	<u>0.00</u>	. □s <u>Ø.00</u>	
	Working capital	\$ <u>_0,00</u>	□\$ <u>1,497,000.</u> 0	
	Other (specify):	□\$ <u>0.00</u>	□\$ <u>0.00</u>	
		□\$ <u>0.</u> ∞	□\$_0 <u>*</u> ∞	
	Column Totals	s 0.00	D\$1,497,000,0	
	Total Payments Listed (column totals added)	<u>□\$ 1,447,000.00</u>		
	D. FEDERAL SIGNATURE			
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notic nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commistender information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ssion, upon writte	ale 505, the following en request of its staff,	
H	allancil International, LLC Signature White Park	Date 12/6	101	
	Title of Signer (Print or Type)  Title of Signer (Print or Type)  OWNO T (ASLAWSK)  CAMINMAN			

ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)